2686

Docket No.: 700664-2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Inventors: Steven Bristow, et al.

Appln. No: 09/837,738

Filed:

April 16, 2001

Title: SOFTWARE AND PROTOCOL STRUCTURE FOR AN AUTOMATED USER NOTIFICATION SYSTEM Group Art Unit: 2686

Examiner: Naghmeh Mehrpour

Certificate of Mailing Under 37 C.F.R. § 1.8

Date of Deposit: January 7, 2005

Pursuant to 37 C.F.R. § 1.8, I hereby certify that this correspondence and all attachments are being deposited with the United States Postal Service as first class mail on the date indicated above in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Karen Wuerfel

RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

In response to the Restriction Election Requirement mailed December 14, 2004, Applicants hereby elect, without traverse, the claims of Group I – claims 1-29 and 51-79. Applicants reserve their right to file one or more divisional applications with the claims of Group II - claims 30-50 and 80-100.

Docket No.: 700664-2001

Any questions regarding the above election should be brought to undersigned's attention.

DATE: January 7, 2005

Respectfully submitted,

BINGHAM McCUTCHEN, LLP

By:

Gary D. Lueck

Registration No. 50,791 Antoinette Konski Registration No. 34,202 Attorneys for Applicants

Three Embarcadero Center, Suite 1800 San Francisco, California 94111

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Karen Wuerfel

TRANSMITTAL LETTER

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Enclosed herewith for filing are the following:

Response to Election / Restriction Requirement (2 pages)

Return Postcard

CLAIMS AS AMENDED			ar in the second of the second			
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	58	100	0	x \$9.00	x \$18.00	0.00
Independent Claims	6	8	0	x \$42.00	x \$84.00	0.00
Multiple Dependent Claims				\$140.00	\$280.00	-0-
TOTAL FILING FEE						\$0.00
NO ADDITIONAL FEE REQUIRED	IF NO FEE R	EOUIRED.	INSERT "	D''		0

LIST INDEPENDENT CLAIMS: 1, 12, 20, 51, 62, 70

- * IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3
- ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3
- *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME
- **** IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON-FEE AMENDMENTS"

The Commissioner is hereby authorized to charge any fees which may be required to Deposit Account No. 50-2518, Docket No. 700664-2001.

DATE: January 7, 2005

Respectfully submitted,

BINGHAM McCUTCHEN, LL

By: _

Gary D. Lueck

Registration No. 50,791

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